

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 10.5
TITLE: OCULAR IMPLANTATION

AUTHORITY: 38 USC 1713; 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(d)(3)(vii)

TRICARE POLICY MANUAL: Chapter 7, Section 6.1

I. EFFECTIVE DATE

On or after FDA approval date.

II. PROCEDURE CODE(S)

65125-65175

III. DESCRIPTION

A. Ocular implantation is done to reconstruct the orbit of the eye following enucleation (removal of an eye) and evisceration procedures. An ocular implant is used to replace the area in the orbit (bony cavity) that was occupied by the eye immediately following the surgical procedure. The eye muscles are attached directly to the implant and the tissues are closed over the implant. This small, spherical implant maintains the natural structure of the orbit and provides support for the artificial eye. A temporary conformer is placed over the implant and under the eyelids to maintain the space for the artificial eye after about three weeks. If a hydroxyapatite ocular implant is used, in about six months, when blood vessels have grown into and around the implant, a small hole may be drilled into the implant so a peg can be inserted. The artificial eye is attached to the peg like a ball and socket joint.

B. An artificial eye is used to restore the natural appearance of the eye and surrounding tissues, and is the visible part of the surgical change to the socket. Artificial eyes are usually made of plastic (acrylic) or glass by highly skilled ocularists (eye makers).

IV. POLICY

A. CHAMPVA will cost-share the preparation and implantation of a FDA approved ocular implant and artificial eye due to the loss of an eye caused by congenital absence, intraocular surgery, trauma, infection or an underlying disease state. Cost-sharing of the ocular implant is on or after the FDA approval date.

B. CHAMPVA will cost-share the peg-fitting procedure (if a hydroxyapatite ocular implant is used) and post operative modifications of the hydroxyapatite ocular implant that is related to the movable aspects of the prosthesis, i.e. drilling the prosthesis and attaching a peg.

V. POLICY CONSIDERATIONS

The peg-fitting, a separate procedure, may be billed separately at least six months after implantation.

END OF POLICY